



Initial Review
BOX 45
Notice of Appeal From The Primary Examiner To the Board of Appeals

290-119 4/18/96

Application of: Robert M. LORENCE et al.

Serial No.: 08/260,536

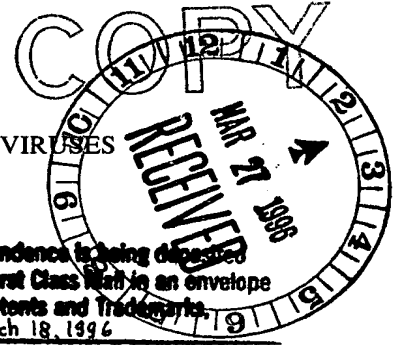
For: METHODS OF TREATING AND DETECTING CANCER USING VIRUSES

Filed: June 16, 1994

Group Art Unit: 1813

Assistant Commissioner for Patents
Washington, D.C. 20231

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I hereby certify that this correspondence is being deposited
with the U.S. Postal Service as First Class Mail in an envelope
addressed to: Commissioner of Patents and Trademarks,
Washington, D.C. 20231 On: March 18, 1996
Name: Richard Lebovitz
Signature: [Signature]
Date: March 18, 1996



SIR:

Applicant hereby appeals to the Board of Appeals from the decision dated October 18, 1995, of the Primary Examiner with respect to all the finally rejected claims, e.g., 13-18, 20, 23, 26 and 35.

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3-29-96
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The item(s) checked below are appropriate:

1. Applicant(s) request(s) that the time for taking action in this case be extended pursuant to 37 C.F.R. §1.136(a).
 - ☒ Included in the attached check is the statutory fee of \$_____ for an extension of time of _____ month(s).
 - ☒ If the box for the sentence immediately above is marked but no check is attached, then charge the statutory fee recited in such sentence for an extension of time of the number of months recited in such sentence to Deposit Account No. 13-3402. Two copies of this sheet are attached for this purpose.
 - ☐ Charge the Statutory Fee of \$_____ for an extension of time of _____ month(s) to Deposit Account No. 13-3402, two copies of this sheet are being attached for this purpose.
2. ☒ A timely response to the final rejection has been filed. (Please note that applicants are filing a request for a two-month extension of time with the amendment being filed concurrently with this Notice of Appeal.
3. ☐ Amended claims presented in the response filed on _____ have been approved for entry. Accordingly, the appealed claims are claims _____.
4. ☒ Fee \$ 290.00
 - ☐ The amount of \$ 290.00 is included in the attached check.
 - ☐ Not required (fee paid in prior appeal).
 - ☐ Please charge my Deposit Account No. 13-3402 in the amount of \$ _____, 2 copies of this sheet are attached.
 - ☒ Charge any deficiencies in the payment of fees associated with this communication or credit any overpayment to Deposit Account No. 13-3402.
 - ☐ Small Entity Status Claimed under 37 C.F.R. §1.9 and 37 C.F.R. §1.27.

Signature (Rule 1.34(a)).....

Post Office Address (to which
correspondence is to be sent).

[Signature]
Richard M. Lebovitz, Registration No. 37,067

Representative Capacity
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Atty's Docket: PROVI 2

Filed: March 18, 1996

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